



MINUTES

Advisory Committee Meeting

Thursday, 04/14/22 from 10:30AM - 12:30PM Held via: Zoom Webinar

Attendance: Melissa Hardy, BDS Facilitator; Sandy Hunt, BDS Facilitator; Jessica Gorton, BDS; Maureen DiTomaso, BDS; Drew Smith A&M; Alecia Ortiz A&M; Denise Gracia (CART); Ann Potoczak ED, Community Bridges; Carrie Beth Duran State Family Support Council; Cathy Spinney Family Advocate; Deb Ritcey CEO Granite State Independent Living; Ellen McCahon ED, CSNI; Isadora Rodriguez-Legendre DD Council; Jennifer Pineo Delegate, NH Family Voices; Karen Hatch Employment Leadership Committee; Keith Steckis (And DSP Denise) Self Advocate; Krista Gilbert Family Advocate; Lisa Beaudoin; Mark Mills ED, Pathways; Mark Vincent Director, Common Ground; Mary St Jacques, IOD; Stephanie Patrick Disabilities Rights Center; Susan Silsby; Tyler Jaques Self Advocate

Note: Members of the public who joined as attendees in listen-only mode are not included in this list.

Please reference the corresponding slide presentation for the detailed agenda, including topics and themes covered in the meeting and corresponding takeaways and applicable action items. This document provides context into areas of substantive discussion which took place during the meeting.

Major Topics and Themes	Key Discussion Areas
Visioning Session Process Review	<p>BDS and IOD recapped the visioning process. Details reviewed included...</p> <ul style="list-style-type: none"> • Purpose: <ul style="list-style-type: none"> ○ To create a unified vision for the future of DD services to be used to guide system change work • Focused on the following questions: <ul style="list-style-type: none"> ○ What brings us here? Why do we want to be a part of systems change? ○ What do you hope the service system will be like in the future? ○ What's working in the current system you want to ensure we keep? ○ What's not working in the current system you want to ensure we are looking at and considering a change?

	<ul style="list-style-type: none"> BDS and IOD worked to create the vision statement, based on values and priorities, from feedback gathered during the session for the Advisory Committee's review and reaction. <i>*all wording from the deliverable came from the March 17, 2022 visioning session</i> <p>The Advisory Committee members reacted to the co-developed vision. Their reactions included...</p> <ul style="list-style-type: none"> Concerns related to the intersection of "community-based system" and provider based residential settings Further discussion on what "equitable" is defined as. Equal access to services/funding/providers no matter where in the state individuals live Concern raised that individuals living in the most independent setting of their choice is not listed under priorities Clarification requested around the possibility of updating waiver language to reflect what will be in this vision An interest in quality and outcome measures added to the priorities Suggestions to put more emphasis on community partnerships with employers to facilitate natural supports Concern over the phrasing of "reduce family burden" Request to add socialization pieces into priorities? Peer-support and social activities are part of the overall health of a person centered, community-based system Suggestion to clarify that under values it is important that we make clear that people with disabilities should lead creating their plans and their services. Services should be built around what individuals and families envision as a good life Clarification requested regarding the definition of advocacy and other terms Comments around the importance of education and peer mentoring Comments around the importance of employment services Suggestions to add the word robust in the vision statement. A modernized, person-centered, ROBUST community-based system that fosters. . . Comment that fair and equal are very different. We want to assure that things are fair but that doesn't always mean equal
Subcommittee Updates	<p>The Waiver Workgroup liaison provided an update on the work of the group. Current work includes...</p> <ul style="list-style-type: none"> Currently drafting service definitions for residential options DSP subcommittee is looking at priorities for certifications and what foundation requirements would be for DSP <p>Reactions from committee members included...</p> <ul style="list-style-type: none"> Emphasis that individuals should be able to get all supports in place to help individuals transition to independent living

	<ul style="list-style-type: none"> Concerns about residential Options for individuals wanting to live in their own home and how that will be supported under the waiver <ul style="list-style-type: none"> BDS clarified that the Intention of the Bureau is to identify and define services that are meant to support people in whatever living arrangement is best for them. An important part of the work is to hear from those living independently to learn more about their living arrangements or creative support services. That information can help the Department define those services, put them in the supports waiver and assign rates to that work so that providers can be reimbursed and people can have access to those individualized services to maintain their independence in the community Sharing anecdotes about times when it has been challenging to advocate for additional services Questions about what residential options will be on which waiver and how people will move between waivers <ul style="list-style-type: none"> Waiver work group is currently identifying services to keep people in their homes Work group would really be interested in hearing feedback especially if there are supports which would bring value to an individual person centered planning and service array to look at the service and then the work group could begin to draft the service definition Concerns about the number of individuals allowed in a residential setting Questions about how the service definitions being crafted. Really want the language looked at and how those services will be defined <ul style="list-style-type: none"> Goal of the waiver group is that everyone had meaningful input into the creation of the service definition Questions about how DSPs could work together with mental health workers <p>The rate work group liaison provided an update about the work of the group. Current work includes...</p> <ul style="list-style-type: none"> Working on creating shared understandings both of our system and the process of collecting information on cost of services from providers and area agencies Working on Cost Report Development template Discussed information solicited from work group participants to articulate what they want to see included in cost reports and concerns with the process Discussed Bureau of Labor Statistics report on job categories. The group is working to back into which categories would most closely align with what a DSP does
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	<ul style="list-style-type: none"> • Recommended a brick build – start with base rate and build upon that based on additional costs. The BLS job category will be the core starting point of the rate build • Important to identify how to cost out Enhanced Family Care (EFC) and Participant Directed and Managed Services (PDMS) arrangements • Workgroup members feel heard <p>Reactions from the committee members included...</p> <ul style="list-style-type: none"> • Questions about how frequently rates will be updated <ul style="list-style-type: none"> ○ BDS shared that the goal is to develop rate methodology with a brick build approach with the ability to rebase every 3-5 years to look at the rate and the data and information in a consistence statewide process. Rate Setting Work Group will look at regional difference and how that will be reflected while developing the cost-report. New Information Technology (IT) Structure will allow for better communication • Question about how if DSP is added to the list of job categories/classification from BLS the work would change to reflect that <ul style="list-style-type: none"> ○ The liaison will bring that question back to the Rate Setting Work Group • Comment about how families supplement what DSPs are being paid • Question about how to tie in wages and moving up the career ladder to the rate methodology. Will this also include case managers? <ul style="list-style-type: none"> ○ BDS and A&M shared information about California which has a tiered DSP wage model based upon credentials. Some other examples that can be looked at when the Rate Setting Work Group gets there • Questions about if the rate group is discussing how the rate structure can be incentivize people to continue their career & improve skills? Are they discussing the indirect labor costs to send people to training and then the backfill costs? People want to go to trainings during work hours. Hybrid delivery system? Live trainings? • Comment about the provider cost of worker development • Question about if the rate setting group is also looking beyond just setting rates, but the competition of that rate? What does attract people to this field? We can have a great rate structure, but we need to understand if there is a will to do the work <ul style="list-style-type: none"> ○ BDS clarified that the role of Rate Group is to develop methodology to develop a rate based on a number of data points. Provider agencies and how they hire and incentivize their workforce and benefits offerings is a separate discussion that the Bureau does not have authority over
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	<ul style="list-style-type: none"> • Comment about how with a baseline of costs from the workers we could get a better understanding of the statistical costs across the state which can help build the rates • Comments about the importance of wrap around benefits for DSPs • Question about who will ensure the provider agencies and/or area agencies will actually pay the rates once they are set? <ul style="list-style-type: none"> ○ BDS clarified that the goal for state is to use cost reports to determine rate adequacy. How providers use the rate may vary • Comment about the challenges PDMS families have retaining staff • Comment about how DSP supply is important • Comment about the importance of peer supports • BDS clarified that CMS will not allow us to use home and community based service dollars unless we can demonstrate that they in fact are a part of the community, not isolated, etc. This is part of that statewide transition plan (settings rule) We cannot use home and community based dollars for institutional settings
Tabled until next meeting	<ul style="list-style-type: none"> • Scenario example review • Benefits of two waivers • The slide deck will be posted. Please review and come to next meeting with thoughts and/or concerns
Beginning to operate with two (2) focus groups	<p>BDS announced that the advisory committee will move forward with two focus groups. Details are summarized below</p> <ul style="list-style-type: none"> • Two focus groups <ul style="list-style-type: none"> ○ Assessment Focus Group ○ Individual Service Agreement (ISA) Focus Group • Will meet once every month to complete the necessary work. • Plan is to have these groups start work during the May Advisory Committee standing meeting <ul style="list-style-type: none"> ○ Will meet at the same time 10:30AM – 12:30PM. Will begin as the entire Advisory Group and then break out into the focus groups • All Advisory Committee members were asked to email BDS@dhhs.nh.gov with their choice of focus group by Friday, April 22, 2022
Next Steps	<ul style="list-style-type: none"> • Please refer to the corresponding work group PPT for details on assignments (if any) and next steps